PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

	correspondence includin d below or directed oth		JE FEE and PUBLICATI ders and notification of n) specifying a new corres	nametenance fees will be pondence address; and/or	mailed to the current correct (b) indicating a separate	"FEE ADDRESS" for		
	ENCE ADDRESS (Note: Use Bl	ock I for any change of address)	Fee(Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
30636	7590 09/08	/2009		Contificate	of Mailing or Transmis	sion		
FAY KAPLUN 150 BROADWA NEW YORK, N		P	I hei State addr trans	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USP10 (571) 273-2885, on the date indicated below.				
				leg F. Kaplun, Esc		(Sepositor's name)		
				1		(Signature)		
					2009	(Date)		
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTO	TORNEY DOCKET NO. CONFIRMATION NO.			
10/573,150	03/22/2006		Gordon Schweizer		40149/01201	3160		
TITLE OF INVENTION	: INTERIOR TRIM PAI	RT FOR COVERING AN	AIRBAG					
.*			,					
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1510	\$300	\$0	\$1810	12/08/2009		
EXAM	IINER	ART UNIT	CLASS-SUBCLASS					
SPISICH, GEORGE D		3616	280-728300					
"Fan Address" ind	ondence address (or Cha B/122) attached. lication (or "Fee Address 22 or more recent) attacl	ange of Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Fay Kaplun & Marcin, LLP 2 3					
PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI	less an assignee is iden th in 37 CFR 3.11. Com	tified below, no assignee pletion of this form is NC	THE PATENT (print or ty data will appear on the p of a substitute for filing an (B) RESIDENCE: (CIT) Hagenbach, C	eatent. If an assignee is in assignment. Yeard STATE OR COUN	identified below, the docu	ament has been filed for		
Please check the appropr	riate assignee category o	r categories (will not be p	orinted on the patent);	Individual Corpora	tion or other private group	entity Government		
4a. The following fee(s) Issue Fee Publication Fee (I	No small entity discount		b. Payment of Fee(s): (Ple A check is enclosed. Payment by credit ca The Director is hereb overpayment, to Dep	rd. Form PTO-2038 is at	tached. e required fee(s), any defic			
5. Change in Entity Sts	ON ALL ENTITY cto	fue See 37 CFR 1 27	☐ b. Applicant is no lor	nger claiming SMALL EN	NTITY status. See 37 CFR	1.27(g)(2).		
NOTE: The Issue Fee ar interest as shown by the	nd Publication Fac (if re records of the United St	quired) will not be accept ates Patent and Trademan	ed from anyone other than	the applicant; a registered	1 attorney or agent; or the	assignee of other party in		
Authorized Signature	1/1	1///		Date Septem	ber <u>2 2</u> , 2009 45,559			
Typed or princed nam	ne Oleg F. Kapl			registration 140.		w the HSPTO to process)		
This collection of inform an application. Confider submitting the complete	nation is required by 37 nitiality is governed by 3 add application form to the for reducing this b	CFR 1.311. The informat 5 U.S.C. 122 and 37 CFF he USPTO. Time will var urden, should be sent to t	ion is required to obtain or R. 1.14. This collection is early depending upon the indi- the Chief Information Office	retain a benefit by the pu stimated to take 12 minut vidual case. Any comme ser, U.S. Patent and Trade	es to complete, including this on the amount of time amount of time amount of time amark Office, U.S. Depart	gathering, preparing, and you require to complete tment of Commerce, P.O.		

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where ar in

appropriate. All further on indicated unless corrected maintenance fee notification	d below or directed oth	g the Patent, advance or erwise in Block I, by (a	ders and notification of m) specifying a new correst	pondence address; and/or	mailed to the current corr (b) indicating a separate	espondence address as "FEE ADDRESS" for		
	NCE ADDRESS (Note: Use Blo	ck 1 for any change of address)	Fee(s	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
30636	7590 09/08/	2009			-	ion		
FAY KAPLUN 150 BROADWA NEW YORK, N		P	l her State addre trans	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
				leg F Kaplun, Eso		(Dopositor's name)		
				19	HIL	(Signature)		
	,		4	eptember 22, 2	2009	(Date)		
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	АТТО	RNEY DOCKET NO. CO	ONFIRMATION NO.		
10/573,150	03/22/2006		Gordon Schweizer		40149/01201	3160		
TITLE OF INVENTION	INTERIOR TRIM PAR	T FOR COVERING AN	AIRBAG	•				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1510	\$300	\$0	\$1810	12/08/2009		
EXAM	INER	ART UNIT	CLASS-SUBCLASS					
SPISICH, C	EORGE D	3616	280-728300					
CFR 1.363). Change of corresp Address form PTO/SI	ence address or indication ondence address (or Cha 3/122) attached. ication (or "Fee Address or more recent) attach	nge of Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or type	pe)				
PLEASE NOTE: Unl recordation as set fort	less an assignee is ident h in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on the p T a substitute for filing an	atent. If an assignee is it assignment.	dentified below, the document	ment has been filed for		
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Faurecia Innenraum Systeme GmbH Hagenbach, Germany								
Please check the appropr	iate assignee category o	categories (will not be p	rinted on the patent):	Individual Corporat	ion or other private group	entity Government		
4a. The following fcc(s) Issue Fee Publication Fee (N Advance Order -	No small entity discount		Ab. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1492 (enclose an extra copy of this form).					
5. Change in Entity Sta	tus (from status indicate		☐ b. Applicant is no lon	ger claiming SMALL EN	TITY status. See 37 CFR	1.27(g)(2).		
NOTE: The Issue Fee an	nd Publication Fee (if records of	uired) will not be accepte	ed from anyone other than the Office.					
	records of the Original Original	11/12		Septeml	oer <u>22</u> , 2009			
Authorized Signature	Oleg F. Kaplı	in Esa		Date	per <u>2 2</u> , 2009 15,559			
Typed or printed han	· · · · · · · · · · · · · · · · · · ·			registration ivo.		d cupres		
Alexanuna, yngina 22.) J-14JV.		ion is required to obtain or 2.1.14. This collection is es y depending upon the indi- he Chief Information Offic COMPLETED FORMS T espond to a collection of in					